ı	ADATEMY ADDI ICATION FOR DEPENDANCE TO SECOND								Application or Docket Number					
1	PATENT APPLICATION FEE DETERMINATION RECO								10821763					
	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL TYPE	ENTITY	OF		R THAN ENTITY		
	TOTAL CLAIM	IS	3	30		٠. ٠		. RATE	FEE	٦	RATE	FEE		
$\ \ $	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	€ € 385.0	OF	BASIC FE	770.00			
	TOTAL CHARG	300	30minus 20a		10	XS 9		an-		X\$18=				
Ŀ	NDEPENDENT	CLAIMS	, ,	, minus 3 =		0		X43=	120	OB	X86=			
Ľ	MULTIPLE DEPI	ENDENT CLAIM	PRESENT	ENT 🗆				+145=		OR				
1.	• If the difference in column 1 is less than zero, enter *0" in column 2								121	I QR	<u> </u>	-		
ı	CLAIMS AS AMENDED - PART II								477	3		THAN		
1	(Column 1) (Column 2) (Column 3							SMALI	ENTITY	OR	SMALL			
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		MIGHI NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	.30	Minus	-3	0	• ~		X\$ 9=	\ /	OR	X\$18=			
Ž	Independent	ENTATION OF M	Minus	PENDENT	SENDENT CLAIM			X43=		OR	X86=			
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	IX	OR	+290=	·		
١,	2 29 07						L	TOTAL		OR	TOTAL ADDIT, FEE			
	5-21-	(Column 1) (Catumn 2) (Calumn 3)												
ENT B	÷	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID P	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	• 31	Minus	- 3	2	- /		X\$ 9=	251	6A	X\$18=			
MA	Independent FIRST PRESE	ESENTATION OF MULTIPLE DEPENDENT CLAIM				\mathbf{I}	X43= ·	·	OR	X86=				
ľ						<u></u>		+145=		OR	+290=	•		
						•	AC	TOTAL DIT: FEE	250	ÒR ,	TOTAL VODIT: FEE			
 	, ·	(Column 1)		(Column		(Column 3)	• .	•		• •	•	·		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	R · SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NON NO	Total	•	Minus					X\$ 9=		OR	X\$18=			
AME	Independent	•	Minus	•••		•		X43•			X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash	145=		OR				
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=			
on the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 20. ADDIT, FEEOR ADDIT, FEEOR														
	The "Highest Num	ber Previously Paid	For (Total or	Independent	is the l	highest number f	bnuo	in the app	ropriate box	in colu	ma 1. ·			
FORM	PTO-675 (Rev. 10	on .							arts Office 11.5					